K35A1242

PTO/SB/01A (10-01)
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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	TIMING COMPENSATION IN A SELF-SERVOWRITING SYSTEM				
As the below named	d inventor(s), I/we declare that:				
This declaration is o	directed to:				
	The attached application, or				
	Application No, filed on,				
	as amended on(if applicable);				
I/we believe that I/w which a patent is so	we am/are the original and first inventor(s) of the subject matter which is claimed and for bught;				
	d and understand the contents of the above-identified application, including the claims, as mendment specifically referred to above;				
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.					
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.					
FULL NAME OF IN	VENTOR(S)				
Inventor one:	HEMANT MELKOTE				
Signature:	Neurant Mellist Citizen of: INDIA				
Inventor two: R	OBERT L. CLOKE				
Signature:					
	Sofert L Cloke Citizen of: UNITED STATES				
Inventor three:	Sofert L Clobe Citizen of: UNITED STATES				
Inventor three: Signature:	Citizen of: Citizen of:				
Signature:					

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents. Washington, DC 20231.

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Applicati n Number	UNKNOWN		
Filing Date	HEREWITH		
First Named Inventor	HEMANT MELKOTE		
Group Art Unit	UNKNOWN		
Examiner Name	UNKNOWN		
Attorney Docket Number	K35A1242		

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Assignee of record of the entire interest. See 37 CFR 3.71.				
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
		Applicant or Assigne	e of Recor	d
Name	HEMANT MELKOTE			
Signature	Kemanthell	NG		
Date	07/30/2003			
		ord of the entire interest of	or their repres	entative(s) are required. Submit multiple
Total of 2	signature is required, see below*. forms are submitted.			

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	UNKNOWN	
Filing Date	HEREWITH	
First Named Inventor	HEMANT MELKOTE	
Group Art Unit	UNKNOWN	
Examiner Name	UNKNOWN	
Attorney Docket Number	K35A1242	

Practitioners at Customer Number OR Practitioner(s) named below: Name Registration Number Registration Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address City Country Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name ROBERT L. CLOKE Signatur Date NOTE: Signatures of at the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required.	Lhoroby appoint:					
OR Practitioner(s) named below: Name		25010				
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address Address City State Zip Country Telephone Fax I am the: Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name ROBERP L. CLOKE Signatur Date July 30, 203 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple		T T T T T T T T T T T T T T T T T T T				
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